

This Information is: <input type="checkbox"/> Public <input type="checkbox"/> Internal ( <b>Volunteer State Health Plan Use Only</b> ) <input type="checkbox"/> Confidential <input type="checkbox"/> Highly Confidential
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**Hysterectomy Notification**  
Request Form

BlueCare/TennCareSelect  
Fax Number: 1-800-292-5311

BlueCare <input type="checkbox"/>	TennCareSelect <input type="checkbox"/>
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<b>Member Information</b>
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**Member Name:** \_\_\_\_\_ **Member ID Number:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Member Phone Number:** \_\_\_\_\_

**Diagnosis: (List all)** \_\_\_\_\_

<b>Physician and Facility Information</b>
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**Ordering Physician:** \_\_\_\_\_ **Provider Number:** \_\_\_\_\_

**National Provider Identifier:** \_\_\_\_\_ **Tennessee Medicaid Number:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**Contact:** \_\_\_\_\_

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**Facility:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Provider Number:** \_\_\_\_\_

**National Provider Identifier:** \_\_\_\_\_ **Tennessee Medicaid Number:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**Requested Date of Service:** \_\_\_\_\_

**Hysterectomy CPT Code Requested:** \_\_\_\_\_ **Outpatient**      **Observation**      **Inpatient**

*Hysterectomy claims require submission of an Acknowledgement of Hysterectomy Information form, operative report, pathology report, history and physical, and office notes that include documentation of conservative measures prior to the hysterectomy. All notifications of service are screened for non-covered, out-of-network, abortion, sterilization, hysterectomy, and investigational procedures. Requests for notification are not subject to prospective medical necessity review, but are subject to retrospective review. Notification is not a confirmation of coverage or benefits. Benefits remain subject to all contract terms, benefit limitations, conditions, exclusions, and the patient's eligibility at the time services are rendered. This request may be subject to retrospective review based on Medical Policy.*

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